State of Minnesota District Court Judicial District: County Court File Number: Case Type: Dissolution In Re the Marriage of: Name of Petitioner **Affidavit of Personal Service** and Name of Respondent STATE OF MINNESOTA) SS COUNTY OF _____ (County where Affidavit signed) , state that I am at least 18 years of age, (Name of person who hand-delivered documents) having been born on and that on , , , , , I served the Order to Show Cause, Notice of Motion and Motion for Contempt, and Affidavit in Support of Motion and all attachments upon (Full name of other party) I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116. Dated: Signature of Person Who Served Documents Name: Address: City/State/Zip: Telephone: ()

E-mail address: